REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/520,502	
Filing Date	January 3, 2005	
First Named Inventor	WARD, Christopher M.	
Art Unit	1632	
Examiner Name	Marcia Stephens Noble	
Attorney Docket Number	021911-001110US	

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450							
Please withdraw me as attorney or agent for the above identified patent application, and							
all the attorneys/agents of record.							
all the attorneys/agents (with registration numbers) listed on the attached paper(s), or							
all the attorneys/agents associated with Customer Number 20350							
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.							
The reasons for this request are: At the request of the client, Oxford BioMedica (UK) Ltd.							
CORRESPONDENCE ADDRESS							
CORRESPONDENCE ADDRESS							
1. 🔲 The	corresponde	ence address is NOT affected by the	is withdrawal				
Change the correspondence address and direct all future correspondence to:							
The address associated with Customer Number:							
OR							
	Firm or Individual Name Marshall, Gerstein & Borun LLP						
Address	dress 233 South Wacker Drive 6300 Sears Tower						
City Chicago State IL			Zip 60606-6357				
Country		US					
Telephone (312) 474-6300			Email				
Signature Karlen Babyak Dews							
Name Karen B. Dow		Registration No. 29,684					
Date	February 🔏	ebruary <u>&</u> , 2008		Telephone No.	Telephone No. 858-350-6100		
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration							

date of a time period for response or possible extension period, the request to withdraw is normally disapproved.